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PTO/SB/01 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing (surcharge) (37 CFR 1.16 (e) required)

Attorney Docket Number 011338-000173

First Named Inventor Jatare Moher

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

MULTI-LEVEL SEAL

(Title of the invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by and amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
			<input type="checkbox"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02/B attached hereto:

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Burden Hour Statement: This form is estimated to take 21 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/BB01 (03-01)

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DECLARATION - Utility or Design Patent Application			
Direct all correspondence to: <input type="checkbox"/> Customer Number <u>24,239</u> OR <input type="checkbox"/> Correspondence addresses below Or Ear Code Label			
Name <u>Moore & Van Allen PLLC</u>			
Address <u>2200 West Main Street, Suite 800</u>			
City <u>Durham</u>	State <u>NC</u>	ZIP <u>27705</u>	
Country <u>US</u>	Telephone <u>(919) 286-8000</u>	Fax <u>(919) 286-8199</u>	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR: <input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any)) <u>Jetara</u>		Family Name Or Surname <u>Melver</u>	
Inventor's Signature <u>Jetara Melver</u>		Date <u>10-29-03</u>	
Residence: <u>Sanford</u>	State <u>NC</u>	Country <u>USA</u>	Citizenship <u>USA</u>
Mailing Address <u>2387 Sheriff Watson Road</u>			
City <u>Sanford</u>	State <u>NC</u>	ZIP <u>27332</u>	Country <u>USA</u>
NAME OF SECOND INVENTOR: <input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any)) <u>Fred</u>		Family Name Or Surname <u>McIntosh</u>	
Inventor's Signature <u>Fred McIntosh</u>		Date <u>10/29/03</u>	
Residence: <u>Sanford</u>	State <u>NC</u>	Country <u>USA</u>	Citizenship <u>USA</u>
Mailing Address <u>3103 Fairway Woods</u>			
City <u>Sanford</u>	State <u>NC</u>	ZIP <u>27332</u>	Country <u>USA</u>
<input type="checkbox"/> Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/025 attached hereto			

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PTO/SB/01 (03-01)

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NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) James		Family Name Or Surname Jones	
Inventor's Signature <i>James Jones</i>		Date 10-29-03	
Residence: Fayetteville	State NC	Country USA	Citizenship USA
Mailing Address 8507 Oakley Drive			
City Fayetteville	State NC	ZIP 28311	Country USA
NAME OF FOURTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Azhar		Family Name Or Surname Rains	
Inventor's Signature		Date	
Residence: Raleigh	State NC	Country USA	Citizenship
Mailing Address 5305 Grove Wood Place			
City Raleigh	State NC	ZIP 27608	Country USA
NAME OF FIFTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name Or Surname	
Inventor's Signature		Date	
Residence:	State	Country	Citizenship
Mailing Address			
City	State	ZIP	Country
<input type="checkbox"/> Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/028 attached hereto			

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